Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	<u>—</u>
Case number (if known)	Chapter you are filing under:
	Chapter 7 Chapter 11 Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself	f	
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	Barrack	LaShon
	First name	First name
Write the name that is on	_ G.	M.
your government-issued picture identification (for	Middle name	Middle name
example, your driver's	Christopher	Christopher
license or passport	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the	First name	First name
last 8 years		
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your	XXX - XX	XXX - XX- <u>3099</u>
digits of your Social Security number or federal	OR	OR
Individual Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

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D	ebtor 1 Barrack	G.	Christopher	Case num	ber (if known)	
	First Name	Middle Name	Last Name			
		About Debtor 1:		About	: Debtor 2 (Spouse Or	nly in a Joint Case):
4.	Any business names and Employer Identification	I have not used any bus	siness names or EINs.	✓ If	nave not used any business na	ames or EINs.
	Numbers (EIN) you have used in the	Business name		Busine	ess name	
	last 8 years	Business name		Busine	ess name	
	Include trade names and doing business as names	EIN		EIN		
		EIN		EIN		
5.	Where you live			If Deb	tor 2 lives at a different ad	dress:
		4209 Quail St		4209 Q	uail St	
		Number Street		Number	r Street	
				-		
		Zion Illinois	60099	7:	III::-	60000
		City State	Zip Code	_ Zion	Illinois	60099
		City State	Zip Code	City	State	Zip Code
		Lake		Lake		
		County		County		
		If your mailing address is	different from the one above,	If Debte	or 2's mailing address is di	fferent from yours fill it
			ourt will send any notices to you at		. Note that the court will send	
		this mailing address.	,,,,,	address		rarry riodoco to trilo mailing
		Number Street		Number	r Street	
				-		
		City Star	te Zip Code	City	State	Zip Code
6.	Why you are choosing this	Check one:		Check	one:	
	district to file for		before filing this petition, I have		ver the last 180 days before f	
	bankruptcy	lived in this district long	er than in any other district.	liv	red in this district longer than	in any other district.
		I have another reason. F	Explain. (See 28 U.S.C. §§ 1408.)	☐ Ib	nave another reason. Explain.	(See 28 U.S.C. §§ 1408.)
				_		
				-		

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De	Ebtor 1 Barrack First Name	G. Middle Name	Christophe Last Name	er	Case number (if know	<u></u>
Pa	rt 2: Tell the Court Abo					
7.	The chapter of the Bankruptcy Code you are choosing to file under		ief description of each, see the top of page 1 and check		-	(b) for Individuals Filing for Bankruptcy (Form
8.	How you will pay the fee	court for mor may pay with on your beha I need to pay Individuals to I request that By law, a judgless than 150 the fee in ins	e details about how yo cash, cashier's checkled, your attorney may your fee in installing Pay Your Filing Fee in the my fee be waived (ge may, but is not recome of the official pover the cash of the official pover the cash.	ou may pay. Took, or money of pay with a cree ents. If you che in Installments (You may required to, waive enty line that apose this option	ypically, if you rder If your a dit card or checoose this option Official Form 10 est this option of your fee, and oplies to your fan, you must fill of the results.	only if you are filing for Chapter 7. may do so only if your income is amily size and you are unable to pay but the <i>Application to Have the</i>
9.	Have you filed for bankruptcy within the last 8 years?	✓ No. Yes. District District District		WhenWhenWhen	MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY	Case number Case number Case number
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Yes. Debtor _ District _ Debtor _ District _		When When	MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
11.	Do you rent your residence?	✓ No. ☐ Yes.	andlord obtained an eviction			nt to stay in your residence? (Form 101A) and file it with

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Debtor 1 Barrack		G.	dle Name	Christopher	Case number (if k	(nown)		
First Name	D			Last Name	_			
Part 3: Report About An 12. Are you a sole	y Bus	No.	Go to Part 4.	Sole Proprieto	<u> </u>			
proprietor of any full- or part-time			Name and location of I	business				
business?								
A sole proprietorship is a business you			Name of business, if a	any				
operate as an individual, and is not a separate legal entity such as a corporation,			Number	Street				
partnership, or LLC.			City		State	Zip Code		
If you have more than one sole proprietorship, use a			Check the appropriate	e box to describe yo	ur business:			
separate sheet and				· ·	in 11 U.S.C. § 101(27A))			
attach it to this petition.				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A))				
pounom				oker (as defined in 1	• , ,,			
			None of the abo	ove				
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B).							
For a definition of	✓	No.	I am not filing under C	hapter 11.				
small business debtor, see 11 U.S.C.		No.	I am filing under Chap Bankruptcy Code.	oter 11, but I am NO	T a small business debtor	according to the de	finition in the	
§ 101(51D).		Yes.	I am filing under Chap	oter 11 and I am a sn	nall business debtor accord	ding to the definition	n in the Bankruptcy Code.	
Part 4: Report if You Ow	n or	Have /	Any Hazardous Pr	operty or Any	Property That Need	s Immediate A	ttention	
14. Do you own or have any property that poses or is alleged to pose a threat of	✓	No. Yes.	What is the hazard?					
imminent and identifiable hazard			If immediate attention is	needed, why is it ne	eded?			
to public health or safety? Or do you			Where is the property?					
own any property that needs immediate				Number	Street			
attention?								
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				City	State		Zip Code	

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Debtor 1 Barrack Christopher Case number (if known)

First Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit ✓ I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of about credit counseling, you must file a motion for waiver of credit counseling with the court. credit counseling with the court.

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Debtor 1 Barrack		Christopher Case number (if kr	nown)				
Part 6: Answer These Qu	uestions for Reporting Purpo						
16. What kind of debts do you have?	16a Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. 8						
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	paid that funds will be availa No. Yes.	er 7. Go to line 18. Do you estimate that after any exempt propert lable to distribute to unsecured creditors?	y is excluded and administrative expenses are				
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000				
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion				
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion				
Part 7: Sign Below							
For you	and correct. If I have chosen to file under of 11,12, or 13 of title 11, United choose to proceed under Chap If no attorney represents me ame fill out this document, I had I request relief in accordance I understand making a false so	Chapter 7, I am aware that I may property. I States Code. I understand the relief pter 7. and I did not pay or agree to pay sore obtained and read the notice required with the chapter of title 11, United Statement, concealing property, or obtained can result in fines up to \$250,0152, 1341, 1519, and 3571. Statement Statem	f available under each chapter, and I meone who is not an attorney to help uired by 11 U.S.C. § 342(b). tates Code, specified in this petition. staining money or property by fraud in 200, or imprisonment for up to 20 Shon Christopher e of Debtor 2				

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Debtor 1 Barrack	G.	Christopher	Case number (ii	f known)	
First Name	Middle Name	Last Name			
For your attorney, if you are represented by one If you are not represented by an	eligibility to proceed un the relief available und to the debtor(s) the no	nder Chapter 7, 11, 1 der each chapter for tice required by 11 L	I2, or 13 of title 11, Ur which the person is e J.S.C. § 342(b) and, in	nat I have informed the debtor(s) about nited States Code, and have explained ligible. I also certify that I have delivered a case in which § 707(b)(4)(D) applies, ation in the schedules filed with the	ţ
attorney, you do not need to file this page.	/s/ Nathan Delman Signature of Attorney		Date	11/4/2016 MM / DD / YYYY	
	Nathan Delman				
	Printed name				_
	Semrad Law Firm				_
	Firm name				
	5101 Washington Stre	eet			
	Street				
	Unit 29				_
	Gurnee		Illinois	60031	
	City		State	Zip Code	_
	Contact phone	3124473700	Email address	ndelman@semradlaw.com	_
	6296205		Illino	is	
	Bar number		State	•	

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Fill in this information to identify your case:					
Debtor 1	Barrack	G.	Christopher		
	First Name	Middle Name	Last Name		
Debtor 2	LaShon	M.	Christopher		
(Spouse, if filing	^{ng)} First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		Northern	District of Illinois (State)		
Case number (If known)					

Check if this is ar
amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$127,333.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$9,080.00
1c. Copy line 63, Total of all property on Schedule A/B	\$136,413.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$158,789.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$28,328.00
Your total liabilities	\$187,117.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$4,273.38
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J	\$4,273.00

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Deb	otor 1 Barrack	G.	Christopher	Case number (if known)				
	First Name	Middle Name	Last Name					
Part	4: Answer These	Questions for Administ	rative and Statistical Re	ecords				
6. A	re you filing for bankr	uptcy under Chapters 7, 11, or	r 13?					
[No. You have nothin	ng to report on this part of the form	n. Check this box and submit this	s form to the court with your other schedules.				
[✓ Yes.							
7. W	/hat kind of debt do y	ou have?						
[Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159.							
[t primarily consumer debts. You twith your other schedules.	ou have nothing to report on this	part of the form. Check this box and submit				
		of Your Current Monthly Incom R, Form 122B Line 11; OR, Form		nthly income from Official	\$7,391.00			
9.	Copy the following s	special categories of claims fro	om Part 4, line 6 of Schedule l	E/F:				
	From Part 4 on Sche	edule E/F, copy the following:		Total claim				
	9a. Domestic support	obligations (Copy line 6a.)		\$0.00				
	9b. Taxes and certain of	other debts you owe the governme	ent. (Copy line 6b.)	\$0.00				
	9c. Claims for death or	r personal injury while you were in	ntoxicated. (Copy line 6c.)	\$0.00				
	9d. Student loans. (Co	py line 6f.)		\$4,885.00				
		out of a separation agreement o	r divorce that you did not report	as <u>\$0.00</u>				
	priority claims. (Copy	ime og.)		\$0.00				
	9f. Debts to pension o	r profit-sharing plans, and other s	similar debts. (Copy line 6h.)					
	9g. Total. Add lines 9a	a through 9f.		\$4 885 00				

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Fill in this information to identify your case:					
Debtor 1	Barrack	G.	Christopher		
	First Name	Middle Name	Last Name		
Debtor 2	LaShon	M.	Christopher		
(Spouse, if filin	g) First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		Northern	District of Illinois		
Case number (If known)			(State)		

Official Form 106A/B

Check if this is an amended filing

12/15

Schedule A/B: Property

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question

write your name and case number (if known). Answer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2 Yes. Where is the property? $\overline{\mathbf{V}}$ What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home 1.1 Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building 4209 Quail St Current value of the Current value of the Street Number Condominium or cooperative entire property? portion you own? Manufactured or mobile home \$127333.00 \$127333.00 Illinois 60099 Land Zion City Describe the nature of your ownership State Zip Code Investment property interest (such as fee simple, tenancy by Timeshare Lake the entireties, or a life estate), if known. County Other Check if this is community property Who has an interest in the property? Check (see instructions) Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: 1.2 Single-family home Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Current value of the Current value of the Condominium or cooperative entire property? portion you own? Manufactured or mobile home Number Street Describe the nature of your ownership Investment property interest (such as fee simple, tenancy by Timeshare the entireties, or a life estate), if known. Citv State Zip Code Check if this is community property Who has an interest in the property? Check (see instructions) Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number:

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Debtor 1	Barrack	G.	Christopher Case number	er (if known)	
	First Name	Middle Name	Last Name		
	mber Street State	other description Zip Code	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Do not deduct secured of the amount of any secure Creditors Who Have Clat Current value of the entire property? Describe the nature of interest (such as fee si the entireties, or a life of the entireties).	cd claims on Schedule D: nims Secured by Property. Current value of the portion you own? your ownership mple, tenancy by
			Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item	Check if this is con (see instructions)	mmunity property
			property identification number:		
	l the deller value of the r	ortion vou own fo	r all of your entries from Part 1, including any entri		333.00
you ha	ave attached for Part 1. V	/rite that number h	nere		
you ha Part 2: Do you ov you own the 3. Cars, va	Describe Your Vehicum, lease, or have legal on the someone else drives. If ans, trucks, tractors, sport to	cles or equitable interes	st in any vehicles, whether they are registered or not also report it on Schedule G: Executory Contracts and Ur	t? Include any vehicles	
you ha Part 2: Do you own th 3. Cars, va	Describe Your Vehice wn, lease, or have legal of the trucks, tractors, sport to the trucks, tractors, sport to the trucks.	cles or equitable interes	st in any vehicles, whether they are registered or not also report it on Schedule G: Executory Contracts and Ur	t? Include any vehicles nexpired Leases. Do not deduct secured control the amount of any secure.	laims or exemptions. Put ed claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$1050.00

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Debtor 1	Barrack First Name	G. Middle Name	Christopher Last Name	Case number	(if known)	
2.2		iviliquie (Name		nortus Chaala	Do not dod: at account	doime or everentions. Det
3.3	Make Model:		Who has an interest in the pro one.	perty r Check		claims or exemptions. Put red claims on <i>Schedule D:</i>
	Year:		Debtor 1 only		•	laims Secured by Property.
	Approximate mileage:		Debtor 2 only			, , ,
	Other information:		Debtor 1 and Debtor 2 only		Current value of the entire property?	Current value of the portion you own?
			At least one of the debtors and	another		<u> </u>
			Check if this is community	property (see		
			instructions)			
3.4	Make		Who has an interest in the pro	perty? Check		claims or exemptions. Put
	Model:		one.		•	red claims on Schedule D:
	Year:		Debtor 1 only		Creditors Who Have C	laims Secured by Property.
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 only		entire property?	portion you own?
			At least one of the debtors and	another		
			Check if this is community instructions)	property (see		
41	Yes		Who has an interest in the pro-	narty? Check	Do not deduct secured	claims or exemptions. But
4.1	Make Model:		Who has an interest in the pro one.	perty? Check		claims or exemptions. Put red claims on <i>Schedule D:</i>
	Year:		Debtor 1 only			laims Secured by Property.
	Approximate mileage:		Debtor 2 only		Comment realize of the	Command oralize of the
	Other information:		Debtor 1 and Debtor 2 only		Current value of the entire property?	Current value of the portion you own?
			At least one of the debtors and	another		 -
			Check if this is community	property (see		
			instructions)			
4.2	Make		Who has an interest in the pro	perty? Check	Do not deduct secured	claims or exemptions. Put
	Model:		one.			red claims on Schedule D:
	Year:		Debtor 1 only		Creditors Who Have C	laims Secured by Property.
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 only		entire property?	portion you own?
			At least one of the debtors and	another		·
			Check if this is community instructions)	property (see		
E 10 dd	the dollar value of the por					

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Debtor 1	Barrack First Name	G. Middle Name	Christopher Last Name	Case number (if known)	
Part 3:		our Personal and Househo			
		ave any legal or equitable i		lowing items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
		s and furnishings bliances, furniture, linens, china, kitche	enware		
□ No	лез. Мајог арг	mances, rumiture, intens, crima, kitorie	aiwaie		
✓ Yes.	Describe	Used Furniture			<u>\$750.00</u>
7. Elect Examp		s and radios; audio, video, stereo, an	d digital equipment; computers,	printers, scanners; music	
✓ Yes. I	Describe	x3 tablets, x1 computer			\$300.00
Examp	stamp, co	lue and figurines; paintings, prints, or oth in, or baseball card collections; other	•	-	
Yes.	Describe				
Examp	bles: Sports, ph and kayal	orts and hobbies notographic, exercise, and other hobb ss; carpentry tools; musical instrument		es, golf clubs, skis; canoes	1
res. i	Describe				
10. Fire		les, shotguns, ammunition, and relate	d equipment		-
✓ No					
Yes.	Describe				
		clothes, furs, leather coats, designer	wear, shoes, accessories		
∐ No ✓ Yes. I	Describe	Used Clothing			#0F0 00
100.1	2 0001100111	Occurring			\$350.00
12. Jew Examp		ewelry, costume jewelry, engagement er	rings, wedding rings, heirloom	jewelry, watches, gems,	
	Describe				1
	n-farm animal bles: Dogs, cat	s, birds, horses			
✓ No					
Yes.	Describe				
	other person	nal and household items you did n	ot already list, including any	health aids you did not list	1
✓ No					7
Yes. I	Describe				
		llue of all of your entries from Part			\$1400.00

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Deb	tor 1	Barrack First Name	G. Middle Name	Christopher Last Name	Case number (if known)	
Part	4:	Describe Your F				
Do	you	ı own or have a	ny legal or equitable inte	rest in any of the fo	llowing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. C						
Е	xam		e in your wallet, in your home, in a s	afe deposit box, and on hand	d when you file your petition	
		No				\$20.00
47					Cash:	Ψ20.00
17.	Exa		vings, or other financial accounts; titutions. If you have multiple acco		es in credit unions, brokerage houses, n, list each.	
		No		Lactic Caracas		
	✓	Yes		Institution name:		
			17.1. Checking account:	Alec		\$200.00
			17.2. Checking account:	Chase		\$0.00
			17.3. Savings account:	Alec		\$10.00
			17.4. Savings account:	Chase		\$0.00
			17.5. Certificates of deposit:			
			17.6. Other financial account:			
			17.7. Other financial account:			
			17.8. Other financial account:			
			17.9. Other financial account:			
18.			or publicly traded stocks			
	Exa	mples: Bond funds, in No	vestment accounts with brokerage	firms, money market accou	nts	
		Yes	Institution or issuer name:			
19.				ed and unincorporated b	usinesses, including an interest in	
	_	L LC, partnership, a No	ind joint venture			
	Ħ	Yes. Give specific	Name of entity		% of ownership:	
		information about them				
		u OIII				

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Deb		Barrack	G. Middle Name	Christopher Last Name	Case number (if known)	
20.	Gove Nego	First Name ernment and corportiable instruments in negotiable instruments.				
	✓ N □ Y ir	No /es. Give specific nformation about hem	Issuer name:	, -gg	g	
21.		ement or pension		A 46-70	Lanca de la companya	
		npies: interests in in No	Type of account:	o), thrift savings accounts, or of Institution name:	her pension or profit-sharing plans	
		es. List each				\$0.00
		account separately.	401(k) or similar plan:	IMRF		
			401(k) or similar plan:	Baxter		\$0.00
			Pension plan:			
			IRA:			
			Retirement account:			_
			Keogh:			_
			Additional account:			
			Additional account:			_
22.	Your s Exam	rity deposits and p share of all unused of aples: Agreements v panies, or others	orepayments deposits you have made so that y with landlords, prepaid rent, pub	rou may continue service or use lic utilities (electric, gas, water),	from a company telecommunications	
	✓ N	No		Institution name:		
	∐ Y	/es	Electric:			_
			Gas:			_
			Heating oil:			_
			Security deposit on rental unit:			
			Prepaid rent:			_
			Telephone:			_
			Water:			_
			Rented furniture:			
			Other:			
23.	_	uities (A contract for	r a periodic payment of money to	you, either for life or for a numb	per of years)	
	Ξ.	√es	Issuer name and description:			
						_
						_

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Debte	or 1 Barrack First Name	G. Middle 1	Name	Christopher Last Name	Case number (if known)	_
24.	Interests in ar		ount in a qualifie		er a qualified state tuition program	
	✓ No Yes	Institution name and descript	ion. Separately file	the records of any interests	.11 U.S.C. § 521(c):	
25.	Trusts, equita	ble or future interests in p	roperty (other th	an anything listed in line	1), and rights or powers	
	✓ No Yes. Descri					7
26.	Patents conv	rights, trademarks, trade s	ecrots and other	r intellectual property		
20.		net domain names, websites			nents	
	Yes. Descri	ribe				
27.		uchises, and other general		ssociation holdings liquor li	censes, professional licenses	
	✓ No				0011000, protocolorial 10011000	7
	Yes. Desc					
Mon	ney or prope	rty owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	ney or prope Tax refunds ov					portion you own?
	Tax refunds ov					portion you own? Do not deduct secured
	Tax refunds ov	ved to you			Federal:	portion you own? Do not deduct secured
	Tax refunds ov No Yes. Give s about you al	ved to you pecific information them, including whether lready filed the returns			Federal: State:	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds ov No Yes. Give s about you al	ved to you pecific information them, including whether				portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds ov No Yes. Give s about you al and th	pecific information them, including whether iready filed the returns he tax years	ousal support, child	d support, maintenance, divo	State:	portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds ov No Yes. Give s about you al and th	pecific information them, including whether iready filed the returns he tax years	ousal support, child	d support, maintenance, divo	State: Local: proce settlement, property settlement	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds ov ✓ No Yes. Give s about you al and th Family suppor Examples: Past ✓ No	pecific information them, including whether iready filed the returns he tax years	ousal support, child	d support, maintenance, divo	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds ov ✓ No Yes. Give s about you al and th Family suppor Examples: Past ✓ No	pecific information them, including whether ready filed the returns he tax years t due or lump sum alimony, spe	ousal support, child	d support, maintenance, divo	State: Local: proce settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds ov ✓ No Yes. Give s about you al and th Family suppor Examples: Past ✓ No	pecific information them, including whether ready filed the returns he tax years t due or lump sum alimony, spe	ousal support, chik	d support, maintenance, divo	State: Local: Property settlement Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds ov ✓ No Yes. Give s about you al and th Family suppor Examples: Past ✓ No	pecific information them, including whether ready filed the returns he tax years t due or lump sum alimony, spe	ousal support, child	d support, maintenance, divo	State: Local: Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28. 29.	Tax refunds ov ✓ No ☐ Yes. Give s about you al and th Family suppor Examples: Past ✓ No ☐ Yes. Give s Other amounts Examples: Unpa	pecific information them, including whether lready filed the returns te tax years t due or lump sum alimony, specific information	e payments, disab	ility benefits, sick pay, vacatio	State: Local: Alimony: Maintenance: Support: Divorce settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28. 29.	Tax refunds ov ✓ No ☐ Yes. Give s about you al and th Family suppor Examples: Past ✓ No ☐ Yes. Give s Other amounts Examples: Unpa	pecific information them, including whether lready filed the returns te tax years t due or lump sum alimony, spe pecific information	e payments, disab	ility benefits, sick pay, vacatio	State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28. 29.	Tax refunds ov ✓ No ☐ Yes. Give s about you al and th Family suppor Examples: Past ✓ No ☐ Yes. Give s Other amounts Examples: Unpa	pecific information them, including whether lready filed the returns te tax years t due or lump sum alimony, specific information	e payments, disab	ility benefits, sick pay, vacatio	State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	otor 1 Barrack	G.	Christopher	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insuran Examples: Health, dis		alth savings account (HSA); credit, ho	neowner's, or renter's insurance	
	Yes. Name the in of each policy an	surance company d list its value	Company name:	Beneficiary:	Surrender or refund value:
32.			someone who has died roceeds from a life insurance policy, or	are currently entitled to receive	
	Yes. Describe				
33.			ou have filed a lawsuit or made a drance claims, or rights to sue	emand for payment	
	✓ No ☐ Yes. Describe				
34.	to set off claims	nd unliquidated claims of	every nature, including countercla	aims of the debtor and rights	
	Yes. Describe				
35.	Any financial assets	s you did not already list			
	Yes. Describe				
36.		-	n Part 4, including any entries for p		\$230.00
Dort	Dogoribo An	u Pusinasa Palatad B	dronorfy You Own or Hoyo or	Interest In. List any real estate	in Port 1
Part					III Fail I.
37.	_		erest in any business-related prope		current value of the
	No. Go to Part 6. Yes. Go to line 38			p	ortion you own? to not deduct secured claims r exemptions
38.	Accounts receivable	e or commissions you alre	ady earned		
	Yes. Describe				
39.	Examples: Business-	furnishings, and supplies related computers, software	, modems, printers, copiers, fax machi	nes, rugs, telephones, desks, chairs, electro	nic devices
	✓ No Yes. Describe				
1					

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Deb	tor 1	Barrack	G.	Christopher	Case number (if known)	
40.	Mad	First Name chinery, fixtures, eq	Middle Name	Last Name use in business, and tools of your	trade	
	V	No	,,pp you	, and 10010 of your		
		Yes. Describe				
41.	Inv	entory				
	V	No				
	Ħ	Yes. Describe				
42.	Inte	erests in partnersh	ips or joint ventures			
	✓	No				
		Yes. Give specific		Name of entity:	% of ownership:	
		information about them				
43. (Cust	omer lists, mailing	lists, or other compilat	ions		
		No				
	Ш	Yes. Do your lists in	clude personally identifiab	ole information (as defined in 11 U.S.C	C. § 101(41A))?	
		☐ No				
		Yes. Descr	ribe			
44.	Any	y business-related p	property you did not alre	eady list		
	✓	No				
		Yes. Give specific				
		information				
						
45 A	dd fl	he dollar value of a	Il of your entries from D	art 5, including any entries for pag	res vou have attached	
			•			
Part	t 6:	Describe Any F If you own or have ar	Farm- and Commerce in interest in farmland, list it	cial Fishing-Related Propert in Part 1.	ty You Own or Have an Interest	ln.
46.	Do	you own or have a	ny legal or equitable int	erest in any farm- or commercial f	ishing-related property?	
	✓	No. Go to Part 7.				Current value of the portion you own?
		Yes. Go to line 47.				Do not deduct secured
						claims or exemptions
47.		rm animals				
	Exa	amples: Livestock, po	ultry, farm-raised fish			
	✓	No				
	Ш	Yes. Describe				

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Debt	or 1	Barrack First Name	G. Middle Name	Christopher Last Name	Case number (if known)	
48.	Cro	ps-either growing		Last Name		
40.	_		n narvesteu			
	넴	No Van Danaviha				
	Ш	Yes. Describe				
	-				·	
49.	Far	m and fishing equip	oment, implements, machinery, f	xtures, and tools of trade		
	✓	No				
		Yes. Describe				
		L				
50.	Far	m and fishing supp	lies, chemicals, and feed			
	/	No				
		Yes. Describe				
51.	An۱	r farm- and commer	cial fishing-related property you	did not already list		
		No	3 • • • • • • • • • • • • • • • • • • •			
	H	Yes. Describe				
	_					
	-				Г	
			of your entries from Part 6, inclu			
or Pa	art 6.	write that number	here			
5 (Danasila All Du		. In tanget in That Van	Did Not List Alsons	
Part			operty You Own or Have ar perty of any kind you did not alre		Did Not List Above	
			, country club membership	auy list:		
	✓	No				1
	П	Yes. Give specific				
		information				
54. Ac	dd th	ne dollar value of all	of your entries from Part 7. Write	e that number here	>	
Part 8	8:	List the Totals of	of Each Part of this Form			.
55. P	art 1	l: Total real estate, I	ine 2		>	\$127333.00
		•				
56. p	art 2	2 total vehicles, line	5	\$7450.00	_	
57. P a	art 3	: Total personal and	household items, line 15	\$1400.00	_	
58. P a	art 4	: Total financial ass	ets, line 36	\$230.00	_	
59. P	art !	5: Total business-re	lated property, line 45	φ230.00	_	
					_	
			shing-related property, line 52		_	
61. P	art 7	7: Total other prope	rty not listed, line 54			
62. T	otal	personal property.	Add lines 56 through 61	\$9080.00		+ \$9080.00
					Copy personal property total ►	
						\$136413.00
63. T c	otal	of all property on So	chedule A/B. Add line 55 + line 62.			

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Fill in this information to identify your case:					
Debtor 1	Barrack	G.	Christopher		
	First Name	Middle Name	Last Name		
Debtor 2	LaShon	M.	Christopher		
(Spouse, if fili	ing) First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	Northern	District of Illinois (State)		
Case number (If known)			(Giale)		

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	art 1: Identify the Property You Claim as Exempt							
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption				
	Brief description: 4209 Quail St, Zion, IL 60099 Line from Schedule A/B: 01	\$127,333.00	\$0 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-901				
	Brief description: Chrysler PT Cruiser, 2007 Line from Schedule A/B: 03	\$1,050.00	\$0 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)				
3.	Are you claiming a homestead exemptio (Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property covere No Yes							

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Debtor 1 Barrack		Christopher Case number (if known)	
First Name art 2: Additional Page	Middle Name	Last Name	
Brief description of the property line on Schedule A/B that lists the property		Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: Chrysler Aspen, 2007 Line from	\$6,400.00	\$0 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)
Schedule A/B: 03 Brief description: Alec Line from	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Schedule A/B:17 Brief description:	\$0.00	\$0 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Schedule A/B:17 Brief description: Alec Line from Schedule A/B: 17	\$10.00	\$10.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Chase Line from	\$0.00	\$0 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Schedule A/B:17 Brief description:	\$750.00	\$750.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Schedule A/B:06 Brief description: Used Clothing Line from	\$350.00	\$350.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
Schedule A/B:11 Brief description:x3 tablets, x1 computerLine from	\$300.00	\$300.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Schedule A/B:07 Brief description: Cash on Hand Line from Schedule A/B:16	\$20.00	\$20.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Schedule A/B:16 Brief description: IMRF Line from	\$0.00	\$0 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-704
Schedule A/B: 21 Official Form 106C	Schedule C:	The Property You Claim as Exempt	page 2

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Fill in	this information to identify your case:			_	735 ILCS 5/12	2-704
(description:	ψ0.00	\$0	_		
Debto	or 1 Baxter Barrack First Name	G. Middle Name	Christopher Last Want fair market value, u	p to any		
_	Line from		applicable statutory limit	,		
(Spot	Schedule A/BaShon 21 use, if filing) First Name	M. Middle Name	Christopher Last Name			
		Wilder Harris	Lastranio			
Unite	d States Bankruptcy Court for the:	Northern	District of Illinois			
Case	number		(State)			
(If kno						
Off	icial Form 106D			<u>I</u>		Check if this is ar
		1471 11		5		mended filing
Sc	hedule D: Credite	ors Who Hav	ve Claims Secur	ed by Pro	perty	12/1
	complete and accurate as possibl					
•	is needed, copy the Additional Pa ase number (if known).	ige, fill it out, number the	entries, and attach it to this form	n. On the top of any	additional pages, write	e your name
	Do any creditors have claims secur	rod by your proporty?				
1. I			r other schedules. Vou hove sething	also to report on this	form	
			r other schedules. You have nothing	eise to report on this	OIII.	
	Yes. Fill in all of the information b	elow.				
Part '	1: List All Secured Claims					
2.	List all secured claims. If a creditor			Column A	Column B	Column C
	for each claim. If more than one cred much as possible, list the claims in a			Amount of claim	Value of	Unsecured
	much as possible, list the claims in a	aiphabeticai ordei accordinț	g to the creditor's name.	Do not deduct the value of collateral.	collateral	portion
				value of collateral.	that supports this claim	If any
2.1	LOANCARE SERVICING CTR	Describe the property th	nat secures the claim:	\$145,570.00	\$127,333.00	\$18,237.00
	Creditor's Name	4209 Quail Zion, IL	iat secures the claim.			<u> </u>
	INTERSTATE CORP CNTR BLD		he claim is: Check all that apply.			
	Number Street	Contingent	,			
		Unliquidated				
	NORFOLK Virginia 23502 City State ZIP Code	Disputed				
	City State ZIP Code Who owes the debt? Check one.	Nature of lien. Check all	that apply.			
	✓ Debtor 1 only	An agreement you ma	ade (such as mortgage or secured			
	Debtor 2 only	car loan)	(
	Debtor 1 and Debtor 2 only	Statutory lien (such as	s tax lien, mechanic's lien)			
	At least one of the debtors and	Judgment lien from a				
	another Check if this claim relates	Other (including a right	ht to offset)			
	to a community debt	Last 4 digits of account	t number1476			
	Date debt was 6/1/2015 incurred	-				
2.2	ALLY FINANCIAL	Describe the property th	not coourse the eleim.	\$7,143.00	\$6,400.00	\$743.00
	Creditor's Name	Describe the property the 2007 Chevrolet Aspen	iat secures the claim.	Ψ.,ιοιοσ	<u> </u>	
	200 RENAISSANCE CTR Number Street		he claim is: Check all that apply.			
		Contingent				
	DETROIT Michigan 48243	Unliquidated				
	City State ZIP Code Who owes the debt? Check one.	Disputed				
	Debtor 1 only	Nature of lien. Check all	that apply.			
	Debtor 2 only	An agreement you ma	ade (such as mortgage or secured			
	Debtor 1 and Debtor 2 only	car loan)	,			
	At least one of the debtors and		s tax lien, mechanic's lien)			
	another	Judgment lien from a				
	Check if this claim relates to a community debt	Other (including a right	ht to offset)			
	Date debt was 6/1/2012 incurred	Last 4 digits of account	t number 2400			
		YOUR Optrion in Calumn A	on this nage. Write that	¢152.742.00		
	number here:	our entries in Column A	on this page, write that	\$152,713.00		

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Debtor 1 Barr		G.	Christopher	Case n	umber (if known)		
Part:1	Name Additional Page After listing any entries on to 2.4, and so forth.	this page, number t	Last Name		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
SERVIC Creditor's 18230 F Numl Homew City Who ov Det Det At le ano Che	s Name Halsted St Der Street Street Ood Illinois 60430 State ZIP Code Wes the debt? Check one. Dotor 1 only Dotor 2 only Dotor 1 and Debtor 2 only Deast one of the debtors and ther Deck if this claim relates to a namunity debt Deck was 5/1/2015	2007 Chrysler PT As of the date yo Contingent Unliquidated Disputed Nature of lien. Ch An agreement car loan) Statutory lien Judgment lien Other (includin	u file, the claim is: Che	ck all that apply.	\$6,076.00	\$1,050.00	<u>\$5,026.00</u>
	Add the dollar value of you	our entries in Colun	nn A on this page. Wri	te that number	\$6,076.00		
	If this is the last page of y Write that number here:	our form, add the c	dollar value totals from	all pages.	\$158,789.00		

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Fill in	this inform	nation to identify your cas	se:						
Debte	or 1	Barrack	G.		Christopher				
		First Name	Midd	lle Name	Last Name	_			
Debte (Spot		LaShon First Name	M. Midd	lle Name	Christopher Last Name				
` .		ankruptcy Court for the:	Northern	ilo i t amo	District of Illinois				
	number	, ,			(State)				
(If kno									
Offi	cial F	orm 106E/F					☐ Che	eck if this is a	n amended filing
Sc	hedı	ıle E/F: Cre	ditors	Who	Have Unsecu	red Claims	3		12/15
party 1 106A/I that a	to any exe B) and on re listed in s in the bo n).	ecutory contracts or un Schedule G: Executor Schedule D: Creditor	expired leases ry Contracts ar rs Who Hold C n the Continua	that cound Unexp laims Section Page	itors with PRIORITY claims and Id result in a claim. Also list exeined Leases (Official Form 1060 cured by Property. If more space to this page. On the top of any	ecutory contracts on Sc 6). Do not include any c ce is needed, copy the F	hedule A/B: reditors with Part you nee	Property (O partially sed d, fill it out, r	fficial Form cured claims number the
1.		editors have priority ur							
		So to Part 2.		.c againe	.,				
	listed, iden much as p Continuati	itify what type of claim it is ossible, list the claims in on Page of Part 1. If mor	s. If a claim has alphabetical order than one cred	both priori der accord litor holds	more than one priority unsecured ty and nonpriority amounts, list that ing to the creditor's name. If you h a particular claim, list the other crust of or this form in the instruction boo	at claim here and show bo ave more than two priority editors in Part 3.	th priority and	nonpriority a	mounts. As
		,	,				Total claim	Priority amount	Nonpriority amount
2.1	ILDHFS						\$0.00	\$0.00	\$0.00
<u> </u>	Priority C	reditor's Name			ast 4 digits of account number		Ψ0.00	Ψ0.00	ΨΟ.ΟΟ
	509 S. 61 Number	TH STREET Street		v	Vhen was the debt incurred?	n/a			
	ramoon	Cuocu		A	s of the date you file, the claim	is: Check all that apply.			
				[Contingent				
	SPRING! City	FIELD Illinois State	62701 Zip Code	<u> </u>	Unliquidated				
	<u>W</u> ho inc	urred the debt? Check		L	Disputed				
	✓ Debt	or 1 only		Ţ	ype of PRIORITY unsecured cla	aim:			
	Debt	or 2 only		Ŀ	✓ Domestic support obligations				
	Debt	or 1 and Debtor 2 only			Taxes and certain other debts y	ou owe the government			
	At lea	ast one of the debtors and	d another		Claims for death or personal in	jury while you were			
	Chec	ck if this claim relates t	to a community	^у [intoxicated Other. Specify				
		aim subject to offset?		_	_				
	✓ No								
	Yes								
2.2		n, Marion			ast 4 digits of account number	•	\$0.00	\$0.00	\$0.00
	Priority C 509 S. 6th	reditor's Name			When was the debt incurred?	n/a			
	Number	Street							
	c/o State	of Illinois		A	s of the date you file, the claim Contingent	is: Check all that apply.			
	Springfio	ld Illinois	62701	Ļ	= -				
	Springfie City	State	Zip Code		Unliquidated				
		curred the debt? Check	one.	L	Disputed				
		or 1 only			ype of PRIORITY unsecured cla	aim:			
		or 2 only		Ŀ	Domestic support obligations				
		or 1 and Debtor 2 only	1 0	Ļ	Taxes and certain other debts y	ŭ			
	=	ast one of the debtors and		L	Claims for death or personal in intoxicated	jury while you were			
	Ched	ck if this claim relates t	to a community	^у [Other. Specify				
		aim subject to offset?							
Offi	✓ No	106E/E	e.	obodulo l	F/F: Creditors Who Have Unse	oured Claims			nage 1

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Debte		Christopher Case number (if known)	
	First Name Middle Name	Last Name	
Part 2	2: List All of Your NONPRIORITY Unsecured C	laims	
3.	Do any creditors have nonpriority unsecured claims again		
•	No. You have nothing to report in this part. Submit this form Yes.	n to the court with your other schedules.	
	unsecured claim, list the creditor separately for each claim. For	betical order of the creditor who holds each claim. If a creditor has reach claim listed, identify what type of claim it is. Do not list claims alr creditors in Part 3.If you have more than four priority unsecured claims	eady included in Part 1.
			Total claim
4.1		Last 4 digits of account number 1014	\$2,498.00
	Nonpriority Creditor's Name 401 N RIVERSIDE DR	When was the debt incurred? 10/1/2014	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	GURNEE Illinois 60031 Citv State Zip Code	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divo	orce
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other simila debts	ar
	Is the claim subject to offset?	Other. Specify 050 InstallmentLoan	
	✓ No Yes	_	
40			Ø4 004 00
4.2	Nonpriority Creditor's Name	Last 4 digits of account number	\$1,081.00
	401 N RIVERSIDE DR Number Street	When was the debt incurred? 10/1/2014	
	Number Officer	As of the date you file, the claim is: Check all that apply.	
	GURNEE Illinois 60031	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. ✓ Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	 Obligations arising out of a separation agreement or diversity of that you did not report as priority claims 	orce
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	ar
	Is the claim subject to offset?	debts ✓ Other. Specify CreditCard	
	No	- Calon opening - Cloandard	
	Yes		
4.3	BARCLAYS BANK DELAWARE Nonpriority Creditor's Name	Last 4 digits of account number	\$1,125.00
	125 S WEST ST	When was the debt incurred? 9/1/2014	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	WILMINGTON Delaware 19801	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or diversity of that you did not report as priority claims	orce
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	ar
	Is the claim subject to offset?	debts CreditCard	
	✓ No	✓ Other. Specify <u>CreditCard</u>	
	Yes		

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Christopher Debtor 1 Barrack Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** CAPITAL ONE BANK USA N 4.4 \$1,470.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO BOX 85520 When was the debt incurred? 9/1/2015 Number As of the date you file, the claim is: Check all that apply. Contingent RICHMOND Virginia 23285 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? CreditCard Other. Specify_ **✓** No Yes CAPITAL ONE BANK USA N 4.5 \$407.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 85520 When was the debt incurred? 10/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent RICHMOND 23285 Virginia Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? CreditCard Other. Specify **V** No Yes 4.6 Fed Loan Serv \$4,885.00 Last 4 digits of account number ____ 0001 Nonpriority Creditor's Name Pob 69184 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Pennsylvania 17106 Harrisburg Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify_ **✓** No

Yes

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Christopher Debtor 1 Barrack Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** LENDING CLUB CORP 4.7 \$14,589.00 Last 4 digits of account number Nonpriority Creditor's Name 71 STEVENSON ST STE 300 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent SAN FRANCISCO California 94105 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify 060 InstallmentLoan **✓** No Yes SYNCB/CARCARE ONE 4.8 \$370.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2/1/2016 C/O PO BOX 965036 Number As of the date you file, the claim is: Check all that apply. Contingent ORLANDO 32896 Florida Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? CreditCard Other. Specify **✓** No Yes SYNCB/CCARE1 4.9 \$324.00 Last 4 digits of account number Nonpriority Creditor's Name C/O PO BOX 965036 When was the debt incurred? 2/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent Orlando Florida 32896 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? CreditCard Other. Specify _ **✓** No

Yes

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Debtor '	1 Barrack	G.	Christoph	er Cas	e number (if known)	
	First Name	Middle Name	Last Name			
Part 2:	Your NONPRIORITY U	nsecured Claims -	Continuatio	n Page		
	After listing any entries on th	nis page, number them	beginning with	4.5, followed by 4.6,	and so forth.	Total claim
	SYNCB/WALMART		Las	st 4 digits of account	number	\$1,579.00
	Nonpriority Creditor's Name PO BOX 981400		Wł	nen was the debt incu	urred? 4/1/2014	
	Number Street		As	of the date you file, th	ne claim is: Check all that apply.	
	EL PASO Texa	as 79998		Contingent		
	City State		le \Box	Unliquidated		
	Who incurred the debt? Che Debtor 1 only	eck one.		Disputed		
	<u> </u>		Тур	oe of NONPRIORITY ι	ınsecured claim:	
	Debtor 2 only Debtor 1 and Debtor 2 only	,		Student loans		
	At least one of the debtors			Obligations arising ou that you did not report	t of a separation agreement or divor	ce
	Check if this claim relate	es to a community debt	: 🗆	· '	rofit-sharing plans, and other similar	
	Is the claim subject to offset No	t?	✓	Other. Specify	CreditCard	
	Yes					

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Christopher Debtor 1 Barrack Case number (if known) First Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were \$0.00 intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$4,885.00 **Total claims** 6f. Student loans from Part 2 6g. Obligations arising out of a separation agreement or \$0.00 divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$23,443.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$28,328.00 6j. Total. Add lines 6f through 6i.

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Debtor 1	Barrack	G.	Christopher
	First Name	Middle Name	Last Name
Debtor 2	LaShon	M.	Christopher
(Spouse, if fil	ing) First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		Northern	District of Illinois
			(State)

	Official	For	m 1	06G
--	----------	-----	-----	-----

Check if this is ar
amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill in this inform	nation to identify your cas	e:	
Debtor 1	Barrack	G.	Christopher
	First Name	Middle Name	Last Name
Debtor 2	LaShon	M.	Christopher
(Spouse, if filing	First Name	Middle Name	Last Name
United States B	ankruptcy Court for the:	Northern	District of Illinois (State)
Case number (If known)			(State)

П	Check if this is ar
	amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a code No Yes	ebtor.)
2.	Within the last 8 years, have you lived in a community property state or territory? (Cor Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No	mmunity property states and territories include Arizona, California,
	Yes. In which community state or territory did you live? Fill in to	the name and current address of that person
	City State Zip Code	_
3.	In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if yo again as a codebtor only if that person is a guarantor or cosigner. Make sure you have Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule	e listed the creditor on <i>Schedule D</i> (Official Form 106D),
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:

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Fill in this in	formation to identify	y your case:		
Debtor 1	Barrack	G.	Christopher	
	First Name	Middle Name	Last Name	
Debtor 2	LaShon	M.	Christopher	Check if this is:
(Spouse, if filing	First Name	Middle Name	Last Name	An amended filing
United States B	ankruptcy Court for the:	Northern	District of Illinois (State)	A supplement showing post-petition chapte expenses as of the following date:
Case number			(5.5)	
(If known)				MM / DD / YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Describe	Employ	vment
ı aıt ı.	Describe	Lilipio	y i i i C i i t

	Fill in your employment		Debtor 1			Debtor 2			
	information.	Employment status	✓ Employ	ed		✓ Employed	٦		
	If you have more than one		Not Em			= ' '			
	job, attach a separate page with		_				Not Employed		
	information about additional	Occupation	Service Specialist		Teacher Assistant				
	employers.	Employer's name	Baxter Healthcare Corporation			Warren Towr	Warren Township High School District 121		
	Include part time, seasonal,	Employer's address	1 Baxter Pk	w		34090 N Almond Rd			
	or self-employed work.	, , , , , , , , , , , , , , , , , , , ,	Number Stre			Number Street			
	. ,					_			
	Occupation may include student								
	or homemaker, if it applies.		Deerfield	Illinois	60015	Gurnee	Illinois	60031	
			City	State	Zip Code	City	State	Zip Code	
		How long employed	11 years 6 r	nonths		6 years			
		there?							
Part 2	Give Details About	Monthly Income							
	ate monthly income as of the e separated.	date you file this form. If you	have nothing	to report for any	r line, write \$0 in	the space. Inclu	de your non-filir	ng spouse unless	
•	or your non-filing spouse have mo a separate sheet to this form.	ore than one employer, combine	the information	on for all employ	ers for that perso	n on the lines be	elow. If you nee	d more space,	
				For D	ebtor 1	For Debtor 2 non-filing sp			
	ist monthly gross wages, sala	ry, and commissions (before a		2.	\$3,835.50		\$2,867.26		
u	eductions.) ii not paid montniy, ca	illulate what the monthly wage v							
	stimate and list monthly over	, 0		3.	+ \$0.00		+ \$0.00		

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Debt	or 1 Barrack First Name	G.	Christopher	Case number	(if known)		
	First Name	Middle Name	Last Name	For Debtor 1	For Debtor 2 or non-filing spouse		
Co	ppy line 4 here		→ 4.	\$3,835.50	\$2,867.26		
5. Lis	st all payroll deductions:						
5a	a. Tax, Medicare, and Socia	I Security deductions	5a.	\$751.12	\$548.60		
5b	. Mandatory contributions	s for retirement plans	5b.	\$0.00	\$0.00		
50	. Voluntary contributions	for retirement plans	5c.	\$230.12	\$129.03		
50	d. Required repayments of	retirement fund loans	5d.	\$0.00	\$0.00		
56	e. Insurance		5e.	\$104.91	\$0.00		
5f	. Domestic support obliga	ations	5f.	\$446.33	\$0.00		
50	g. Union dues		5g.	\$0.00	\$0.00		
5h	n. Other deductions. Specif	·y:	_ 5h. +	\$219.27	\$0.00		
6. Ad +5h.	d the payroll deductions.	Add lines 5a + 5b + 5c + 5d + 5e +5f	+ 5g 6.	\$1,751.7 <u>5</u>	\$677.62		
7. Ca	Iculate total monthly take-	home pay. Subtract line 6 from line	4. 7. <u> </u>	\$2,083.75	\$2,189.63		
8. Lis	t all other income regularl	y received:					
88	business, profession, or		00				
		n property and business showing grosssary business expenses, and the tot		\$0.00	\$0.00		
8b	. Interest and dividends		8b.	\$0.00	\$0.00		
80	. Family support payment dependent regularly rece	s that you, a non-filing spouse, or eive	ra				
	Include alimony, spousal su divorce settlement, and pro	pport, child support, maintenance, perty settlement.	8c. <u>.</u>	\$0.00	\$0.00		
	d. Unemployment compen	sation	8d	\$0.00	\$0.00		
	e. Social Security		8e.	\$0.00	\$0.00		
8f	Include cash assistance and assistance that you receive, the Supplemental Nutrition subsidies	ance that you regularly receive d the value (if known) of any non-cash such as food stamps (benefits under Assistance Program) or housing					
				\$0.00	\$0.00		
•	g. Pension or retirement in		8g	\$0.00	\$0.00		
		Specify:		\$0.00		I	
9. Ad	d all other income Add line	es 8a + 8b + 8c + 8d + 8e + 8f +8g +	8h. 9	\$0.00	\$0.00	I	
	alculate monthly income. And the entries in line 10 for D	Add line 7 + line 9. ebtor 1 and Debtor 2 or non-filing sp	ouse 10.	\$2,083.75	\$2,189.63	=	\$4,273.38
In re	clude contributions from an u latives.	ibutions to the expenses that you nmarried partner, members of your ho ready included in lines 2-10 or amoun	ousehold, your depe	ndents, your roommate	,		
Sp	pecify:					11. +	\$0.00
		column of line 10 to the amount in				12.	\$4,273.38
vV	and amount of the Odffill	y or corrotation and citationical duri	a.y or cortain Elak		., n appli00		Combined monthly income
13. D	No.	or decrease within the year after yo	ou file this form?				
L	Yes. Explain:						

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Debtor 1 Barrack G. Christopher Case number (if known)
First Name Middle Name Last Name

Part 2: Give Details About Monthly Income

	For Debtor 1	For Debtor 2 or non-filing spouse
5h.Other payroll deductions. Specify:		
1. Dental	\$12.18	\$0.00
2. Flex Personal Accident	\$1.34	\$0.00
3. Health Savings Account	\$10.83	\$0.00
4. IIP Loan	\$194.91	\$0.00

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Debtor 1 Barrack G. Christopher Debtor 2 LaShon M. Christopher Debtor 1 Serrack Name Middle Name Last Name Debtor 2 LaShon M. Christopher United States Barkruptory Court for the: Debtor 1 Services States Barkruptory Court for the: Debtor 2 LaShon M. Christopher Debtor 3 LaShon M. Christopher Debtor 4 LaShon M. Christopher Debtor 5 LaShon M. Christopher Debtor 6 LaShon M. Christopher Debtor 7 Lash Name Destrict of Illinois Case numbor (Illinois) A supplement showing post-pesion chapter 13 expenses so of the following date: Illinois Case numbor (Illinois) A supplement showing post-pesion chapter 13 expenses so file following date: Illinois Case numbor (Illinois) A supplement showing post-pesion chapter 13 expenses so file following date: Illinois Case numbor (Illinois) A supplement showing date: Illinois Case numbor Il							
First Name Middle Name Last Name Check if this is:	Fill in this infor	mation to identify	your case:				
Debot 2 LaShon Middle Name Last Na	Debtor 1	Barrack	G.	Christopher			
Spouse, if filing) First Name Meditle Name Last Name An amended filing An amended filing A supplement showing post-petition chapter 13 expenses as of the following date: MM / DD / YYYY		First Name	Middle Name	Last Name			
Unlied States Barkruptcy Court for the: Northern District of Illinois (State) Case number (Il Known) Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (Il stown). Answer every question. Parts: Describe Your Household 1. Is this a joint case? Yes. Debtor 2 live in a separate household? Yes. Debtor 2 must file Official Forms 106J2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? Dependent's relationship to Debtor 1 and Debtor 1. In this part of Debtor 1 and Debtor 2. Child Spans Spa					Check if this is:		
Case number (It known) Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Parts: Describe Your Household Is this a joint case? No. Go to line 2 Yes. Debotro 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? Do not list Debtor 1 and Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2. Child Yes. Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2. Child Yes. Ill out this information for Debtor 1 and Debto	(Spouse, if filling	^{ng)} First Name	Middle Name	Last Name	An amended filir	ng	
Case number (It known) Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Your Household I. Is this a joint case? No. Go to line 2 Yes. Dees Debtor 2 live in a separate household? No go to line 2 Yes. Debtor 2 must file Official Forms 106.J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? Do not list Debtor 1 and Debtor	United States	Bankruptcy Court	for the: Northern	District of Illinois	A supplement sh	nowing post-petitic	n chapter 13
Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part I: Describe Your Household I. Is this a joint case? No. Go to line 2 Yes. Destor 2 must file Official Forms 106J-2. Expenses for Separate Household of Debtor 2. 2. Do you have dependents? Do not list Debtor 1 and Debtor 2 must file Official Forms 106J-2. Expenses for Separate Household of Debtor 2. Child				(State)			·
Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part II Describe Your Household 1. Is this a joint case? No. Go to line 2 Yes. Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? Do not list Debtor 1 and Debtor 2. 2. Do you have dependents? Child Debtor 1 or Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2. Child Child Dependent's age with your? (Ayears No. Yes. No. Yes. No. Yes. No. Yes. Separate Household of Debtor 2. So your expenses include expenses include expenses of people other I have been your expenses of people other I have been your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4b. Sound				_	-		
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Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, tatch another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Your Household	Schodu	le It Vou	 ur Evnenses				12/1
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No. Go to line 2 Yes. Does Debtor 2 live in a separate household? Yes. Does Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No. Debtor 1 and Debtor 1 and Debtor 2. Child Debtor 2. Child Debtor 3. Dependent's relationship to Debtor 2 with you? Child Person With you? Child Person With you? Yes. Dependent Person	_		Judonolu				
Yes. Does Debtor 2 live in a separate household? Yes. Debtor 2 must file Official Forms 106.1-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents?	_						
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2. Do you have dependents? Do not list Debtor 1 and Debtor 2. Ves. Fill out this information for each dependent Debtor 1 or Debtor 2 Dependent's relationship to Debtor 2 Gyears No. Ves. Ves. Ves. Ves. Child Vegars Ves. Ve		_	Standard Clark Communication C	(O (- 11	0		
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Debtor 2. each dependent Debtor 1 or Debtor 2 Child 6 years No. Yes. Child 4 years No. Yes. Child 4 years No. Yes. A years No. Yes. A years No. Yes. A years A years No. Yes. A years No. Yes. A years Yes. A years No. Yes. A years No. Yes. A years Yes. A years No. Yes. A years No. Yes. A years Yes. A years Your ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses Estimate Your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 1061.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance			☐ No				
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Child 4 years 7 yes. 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. S0.00	Debtor 2.		each dependent		age		
Child 4 years				Child	6 years	=	
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate Your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4a. \$0.00 4b. \$0.00				0.11.1			
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such assistance and have included it on Schedule I: Your Income (Official Form B 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. 4. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4a. So.00	applicable da	ite.					
any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$0.00						You	ur expenses
any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$0.00	4. The renta	l or home owners	ship expenses for your residence. In	clude first mortgage payments and			\$1.319.00
4a. Real estate taxes 4a. \$0.00 4b. Property, homeowner's, or renter's insurance 4b. \$0.00						4.	+ 1,0 10100
4b. Property, homeowner's, or renter's insurance 4b. \$0.00	If not inc	luded in line 4:					
4b. Property, homeowner's, or renter's insurance 4b. \$0.00	4a. Real e	estate taxes				4a	\$0.00
4a Hama maintananaa yanaiy anduunkaan ayaanaa	4b. Prope	erty, homeowner's.	or renter's insurance				<u> </u>
	·	•				•	

\$0.00

4d.

4d. Homeowner's association or condominium dues

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Debtor 1

Barrack

Christopher Case number (if known) First Name Middle Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$260.00 6a. 6b. Water, sewer, garbage collection \$35.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$361.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$600.00 7. 8. Childcare and children's education costs \$540.00 8. 9. Clothing, laundry, and dry cleaning 9. \$85.00 10. Personal care products and services 10. \$50.00 11. Medical and dental expenses \$50.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$360.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$160.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$268.00 17b. Car payments for Vehicle 2 17b \$185.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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Debtor 1	Barrack	G.	Christopher	Case number (if known)		
	First Name	Middle Name	Last Name			
21.Other	. Specify:				21	\$0.00
22. Calcu	late your monthly ex	rpenses.				\$4,273.00
22a. A	add lines 4 through 21.					\$0.00
22b. C	Copy line 22 (monthly e	expenses for Debtor 2), if any, fro	m Official Form 106J-2			\$4,273.00
22c. A	dd line 22a and 22b. T	he result is your monthly expens	ses.		22.	
23.Calcu	late your monthly ne	et income.				
23a. C	Copy line 12 (your com	bined monthly income) from Sch	edule I.		23a	\$4,273.38
23b. C	Copy your monthly expe	enses from line 22 above.			23b	\$4,273.00
		xpenses from your monthly incor	ne.			\$0.38
-	The result is your mon	thly net income.			23c	
24. Do yo	ou expect an increas	e or decrease in your expens	es within the year after you	file this form?		
Ford	yampla da yau aynaa	t to finish paying for your car loar	within the year or do you eve	oot vour		
		ase or decrease because of a m				
✓ N	No					
	⁄es					
	Explain here:					

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Debtor 1	Barrack	G.	Christopher
	First Name	Middle Name	Last Name
Debtor 2	LaShon	M.	Christopher
(Spouse, if fili	^{ng)} First Name	Middle Name	Last Name
United States	Bankruptcy Court for the:	Northern	District of Illinois
			(State)

Official Form 106Dec

Check if this is a
amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t1: Sign Below						
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?						
	☑ No						
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).					
	Under penalty of perjury, I declare that I have read the summary are that they are true and correct.	nd schedules filed with this declaration and					
	•	4-					
X	/s/ Barrack Christopher	/s/ LaShon Christopher					
	Signature of Debtor 1	Signature of Debtor 2					
	Date 11/4/2016	Date 11/4/2016					
	MM/DD/YYYY	MM/DD/YYYY					

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Fill in this inforr	Fill in this information to identify your case:							
Debtor 1	Barrack	G.	Christopher					
	First Name	Middle Name	Last Name					
Debtor 2	LaShon	M.	Christopher					
(Spouse, if filing) First Name		Middle Name	Last Name					
United States E	Bankruptcy Court for the:	Northern	District of Illinois					
			(State)					
Case number (If known)	-							

Official Form 107

Check if this is an amended filing

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part	rt 1: Give Details About Your Marital Status and Where You Lived Before								
1.	Wh	at is your curre	nt marital st	atus?					
	✓	Married Not married							
2.	Dui	ring the last 3 ye	ars, have yo	ou lived anywhere	other than where you live	now?			
	✓	No Yes. List all of th	e places you	lived in the last 3 ye	ears. Do not include where yo	ou live now.			
		Debtor 1:			Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
						Same as I	Debtor 1		Same as Debtor 1
		Number Street			From	Number Street		From	
					То				То
		City	State	Zip Code		City	State	Zip Code	
						Same as I	Debtor 1		Same as Debtor 1
		Number Street			From	Number Stree	t		From
					To	-			То
		City	State	Zip Code		City	State	Zip Code	
	territo	ories include Ariza No	ona, California	a, Idaho, Louisiana,	ouse or legal equivalent in Nevada, New Mexico, Puer btors (Official Form 106H).				mmunity property states and
		ŕ			,				

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Deb	tor 1		Christe Name Last Na		number (if known)	
Dout	0-	1		ine		
Part 4.		Explain the Sources of Your you have any income from employm		usiness during this year or	the two previous calendar yea	ars?
	Fill i	n the total amount of income you receive vities. If you are filing a joint case and you No Yes. Fill in the details.	ed from all jobs and all busine	esses, including part-time		
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		rom January 1 of current year until ne date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$70580.32	Wages, commissions, bonuses, tips Operating a business	
		or last calendar year: lanuary 1 to December 31, 2015) YYYY	Wages, commissions, bonuses, tips Operating a business	\$73496.00	Wages, commissions, bonuses, tips Operating a business	
		or the calendar year before that: lanuary 1 to December 31, 2014) YYYY	Wages, commissions, bonuses, tips Operating a business	\$70000.00	Wages, commissions, bonuses, tips Operating a business	
 	Inclui bene case	you receive any other income during de income regardless of whether that inc fit payments; pensions; rental income; in and you have income that you received each source and the gross income from	come is taxable. Examples of nterest; dividends; money col together, list it only once unde	f other income are alimony; cl lected from lawsuits; royalties er Debtor 1.	s; and gambling and lottery winni	
	✓	No Yes. Fill in the details.			_	
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
		From January 1 of current year until he date you filed for bankruptcy:				
		For last calendar year: January 1 to December 31, 2015) YYYY				
		For the calendar year before that: January 1 to December 31, 2014 YYYYY				

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	First Name		G. Middle Name	Christophe Last Name	er Case num	oer (if known)	
ı L	ist Certain	Payments Yo	ou Made Be	efore You Filed for	Bankruptcy		
_	iot Gortain	r dymonto it	ou made Be	7010 104 1 1104 101	Dankiaptoy		
re eit	ther Debtor 1's	s or Debtor 2's	debts primari	ly consumer debts?			
No		otor 1 nor Debt a personal, fam			Consumer debts are defined	in 11 U.S.C. § 101(8) as "inco	urred by an individual
	During the 9	0 days before yo	u filed for bank	ruptcy, did you pay any c	reditor a total of \$6,425* or mo	ore?	
	No. Go	to line 7.					
	to	otal amount you p	oaid that credite	or. Do not include payme	5* or more in one or more pay nts for domestic support oblic to an attorney for this bankrup	ations, such as	
	* Subject to	adjustment on 4/	01/19 and eve	ry 3 years after that for ca	ses filed on or after the date o	of adjustment.	
∕ Ye	s. Debtor 1 o	Debtor 2 or bo	oth have prim	arily consumer debts.			
	During the 9	0 days before yo	u filed for bank	ruptcy, did you pay any c	reditor a total of \$600 or more	?	
	✓ No. Go	to line 7.					
	th	at creditor. Do n	ot include payı	ments for domestic supp ments to an attorney for t		support and	Was this no ment
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
C	reditor's Name	<u> </u>					Mortgage
N	umber Street						Car Credit card
_							Loan repayment Suppliers or
C	ity	State Z	p Code				vendors Other
C	reditor's Name						Mortgage Car
N	umber Street						Credit card
_							Loan repayment
C	ity	State Z	p Code				Suppliers or vendors
							Other
C	reditor's Name	·					Mortgage
N	umber Street						Car Credit card
_							Loan repayment
C	ity	State Z	p Code				Suppliers or vendors
							Othor

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Debtor	1 Barrack First Name		G. Middle Name		ristopher t Name	Case number (if known)
In co aç	siders include you orporations of which	ur relatives; an ch you are an e for a busines	y general partners officer, director, pe s you operate as a	; relatives of any g rson in control, or	general partners; par owner of 20% or mo	tnerships of which y ore of their voting se	ho was an insider? ou are a general partner; curities; and any managing mestic support obligations,
	No Yes. List all pa	yments to an i	nsider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name	e					
	Number Stree	t					
	City	State	Zip Code				
	Insider's Name	e					
	Number Stree	t					
	City	State	Zip Code				
in	sider?	-			payments or trans	fer any property o	n account of a debt that benefited an
In∈	clude payments o	n debts guarar	nteed or cosigned b	by an insider.			
	Yes. List all pay	ments that be	nefited an insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
							Include creditor's name
	Insider's Name	e					
	Number Stree	t					
	City	State	Zip Code				
	Insider's Name	e					
	Number Stree	t					
	City	State	Zip Code				

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Del	otor 1	Barrack First Name	G. Middle Name	e	Christopher Last Name	C	ase number (if k	(nown)		
Par	t 4:	Identify Legal A	Actions, Reposse	ssions, a	and Foreclosure	s				
	List a		u filed for bankruptcy ding personal injury cas							modifications, and
		No Yes. Fill in the details	S.							
				Nature	of the case	Court or a	gency		Status	of the case
		Case title				Court Nam	0			ending
		Case number								n appeal oncluded
						NumberStr	eet		Пα	niciaca
						City	State	Zip Code		
		Case title							Pe	ending
		0	_			Court Nam	е			n appeal
		Case number				NumberStr	eet		Co	oncluded
						City	State	Zin Codo		
						City	State	Zip Code		
		No. Go to line 11. Yes. Fill in the inform	mation below.		Describe the prope	erty		Date		Value of the property
		Creditor's Name		_						
		Number Street			Explain what happe	enea				
					Property was rep	possessed.				
					Property was for					
		City	State Zip Co	de	Property was ga		or levied.			
					Describe the prope	erty		Date		Value of the property
		Creditor's Name								
		Creditor's Name			Explain what happe	ened				
		Number Street			_					
					Property was rep					
					Property was for Property was ga					
		City	State Zip Co	de	Property was att		or levied.			

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Debto	or 1	Barrack First Name	G. Middle Name	Christopher Last Name	Case number (if known)		
		hin 90 days before you file ounts or refuse to make a p			nk or financial institution, s	et off any amou	nts from your
	✓	No Yes. Fill in the details.					
				Describe the action the	creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street		Last 4 digits of account nu	mber: XXXX-		
		City State	Zip Code				
		hin 1 year before you filed on the control ointed receiver, a custodia		of your property in the po	ossession of an assignee fo	or the benefit of o	creditors, a court-
	✓	No Yes					
Part		List Certain Gifts and					
13.		No		ou give any girts with a tot	tal value of more than \$600	per person?	
	<u>~</u>	Yes. Fill in the details for ea Gifts with a total value of per person	_	Describe the gifts		Dates you gave the gifts	Value
		Kennedy, Charlene Person to Whom You Gave	the Gift	Gift		06/2016	\$3000.00
		1020 1/2 Dodge Number Street					
		Evanston Illinois City State Person's relationship to you Mother	60202 Zip Code				
		Person to Whom You Gave	the Gift				
		Number Street					
		City State Person's relationship to you	Zip Code				

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Debto	or 1	Barrack First Name	G. Middle Name	Christopher Last Name	Case number (if know	n)	
14.	Wit	hin 2 years before you file No Yes. Fill in the details for ea		you give any gifts or contrib	utions with a total value o	of more than \$600 t	o any charity?
ļ	ш	Gifts or contributions to that total more than \$600	charities	Describe what you cont	ributed	Date you contributed	Value
		Charity's Name					
		Number Street					
Part 6	ŝ.	City State List Certain Losses	Zip Code				
		nin 1 year before you filed abling? No Yes. Fill in the details.	for bankruptcy or sin	ce you filed for bankruptcy, (did you lose anything bed	cause of theft, fire,	other disaster, or
		Describe the property yo how the loss occurred	u lost and	Describe any insurance Include the amount that inspending insurance claims A/B: Property.	surance has paid. List	Date of your loss	Value of property lost
]]	Inclu	de any attomeys, bankrupto No Yes. Fill in the details.	y petition preparers, or	Description and value o		Date payment or transfer was made	Amount of payment
		Semrad Law Firm		Attorney's Fee - 0.00		11/3/2016	\$0.00
		Person Who Was Paid Number Street		·			
		City State	Zip Code				
		Email or website address None					
		Person Who Made the Pay	ment, if Not You]	
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
		Email or website address					
		Person Who Made the Pay	ment, if Not You				

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Deb	tor 1	Barrack	G.	Christopher	Case number (if known)		
		First Name	Middle Name	Last Name			
17.	help	nin 1 year before you filed for by you deal with your creditors not include any payment or trans No Yes. Fill in the details.	or to make payments		ehalf pay or transfer	any property to any	yone who promised to
	ш	res. I ill ill the details.		Description and value of any value		Data	Amount of
				Description and value of any partransferred	огоренту	Date payment or transfer was made	Amount of payment
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
		City State	Zip Code				
		ide both outright transfers and to sfers that you have already listed No Yes. Fill in the details.		rity (such as the granting of a secu			Do not include gifts and
				Description and value of any property transferred		y property or eceived or debts pa	Date aid transfer was made
		Person Who Received Transfe	er er				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person Who Received Transfe	er				
		Number Street					
		City State Person's relationship to you	Zip Code				
19.		nin 10 years before you filed ese are often called asset-protec		u transfer any property to a self	f-settled trust or simi	lar device of which	you are a beneficiary?
		No Yes. Fill in the details.					
		.ss. i ii ii die detaile.		Description and value of the	property transferred	I	Date transfer was made
		Name of trust					

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Debto	r 1	Barrack First Name	G. Middle Name		Christopher Last Name	Cas	se number (if known)		
Part 8	:	List Certain Financi				sit Boxes ar	nd Storage Units		
20. i	With mov	hin 1 year before you file yed, or transferred? ude checking, savings, mor peratives, associations, and	ed for bankruptcy, we	re any finan	cial accounts o	or instruments	held in your name, or	-	
	✓	No Yes. Fill in the details.		Last 4 onumber	digits of accou	nt Type o	of account or iment	Date account was	Last balance before
				2000/			had tan	closed, sold, moved, or transferred	closing or transfer
		Person Who Was Paid		- XXXX-			hecking avings		
		Number Street		-		В	loney market rokerage ther		
		City State	Zip Code	-					
		Person Who Was Paid		- XXXX-			hecking avings		
		Number Street				□в	loney market rokerage		
		City State	Zip Code	-			ther		
		you now have, or did you er valuables?	ı have within 1 year b	efore you fi	led for bankru	otcy, any safe o	leposit box or other d	epository for secu	ities, cash, or
ļ	₹	No Von Fill in the details							
ı		Yes. Fill in the details.		Who else	had access to	it?	Describe the cor	ntents	Do you still have it?
		Name of Financial Institu	ition	Name					☐ No
		Number Street		Number	Street				Yes
				City	State	Zip Code	•		
		City State	Zip Code						
22. I		e you stored property in No	a storage unit or pla	ce other tha	ın your home v	vithin 1 year be	efore you filed for ban	kruptcy?	
İ		Yes. Fill in the details.							
				Who else	had access to	it?	Describe the cor	ntents	Do you still have it?
		Name of Storage Facility	,	Name					□ No
		Number Street		Number	Street		-		Yes
				City	State	Zip Code	-		
		City State	Zip Code						

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ebtor :	1 Barrack G.					
	First Name Middle Name	Last Name				
ırt 9:	Identify Property You Hold or Con	trol for Someone	Else			
	o you hold or control any property that some	eone else owns? Includ	le any property you b	orrowed from, are storing for, or hold i	n trust for	
so	omeone.					
J	No No					
È	Yes. Fill in the details.					
_	res. I ill ill the details.	When in the man	- wt - 0	Describe the contents	Value	
		Where is the prop	erty?	Describe the contents	Value	
	Over a da Nama	Ni wala ay Otya at				
	Owner's Name	Number Street				
	Number Street	<u> </u>				
	Nambor Stroot					
		City Sta	te Zip Code			
		-	21p 0000			
	City State Zip Code					
	Cive Details About Environments	Unformation				
art 10	Give Details About Environmenta	i illiorillation				
or the	e purpose of Part 10, the following definitions app	ly:				
_	Environmental law means any fodoral, state, or	local statute or regulation	concerning pollution	contamination releases of		
	Environmental law means any federal, state, or hazardous or toxic substances, wastes, or mate	-	• .			
	including statutes or regulations controlling the		, 0	•		
		·				
	Site means any location, facility, or property as d	•	nental law, whether you	now own, operate, or utilize it		
	or used to own, operate, or utilize it, including d	isposal sites.				
	Hazardaya matarial maana anything an anyiranr					
	Hazardous material means anything an environr	nental law defines as a ha	azardous waste, hazard	ous substance,		
	toxic substance, hazardous material, pollutant, c			ous substance,		
	toxic substance, hazardous material, pollutant, c	contaminant, or similar ter	m.	ous substance,		
		contaminant, or similar ter	m.	ous substance,		
eport	toxic substance, hazardous material, pollutant, of all notices, releases, and proceedings that you k	contaminant, or similar ter	m. when they occurred.			
eport	toxic substance, hazardous material, pollutant, c	contaminant, or similar ter	m. when they occurred.			
eport	toxic substance, hazardous material, pollutant, of all notices, releases, and proceedings that you k	contaminant, or similar ter	m. when they occurred.			
eport	toxic substance, hazardous material, pollutant, of all notices, releases, and proceedings that you keep as any governmental unit notified you that you	contaminant, or similar ter	m. when they occurred.			
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have also not proceedings.	contaminant, or similar ter now about, regardless of ou may be liable or pot	m. when they occurred. entially liable under o	or in violation of an environmental law?		
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have also not proceedings.	contaminant, or similar ter	m. when they occurred. entially liable under o		Date of notice	
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have also not proceedings.	contaminant, or similar ter now about, regardless of ou may be liable or pot	m. when they occurred. entially liable under o	or in violation of an environmental law?	Date of	
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have also not proceedings.	contaminant, or similar ter now about, regardless of ou may be liable or pot	m. when they occurred. entially liable under o	or in violation of an environmental law?	Date of	
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eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have as any governmental unit notified you that you have as any governmental unit notified you that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have any governmental unit notified you that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and proceedings that you have a substance of site and you have a substance o	contaminant, or similar ter now about, regardless of ou may be liable or pot Governmental uni Governmental unit Number Street	m. when they occurred. entially liable under o	or in violation of an environmental law?	Date of	
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eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have you. Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of ar	contaminant, or similar termow about, regardless of ou may be liable or potential unit. Governmental unit. Number Street. City States	m. when they occurred. entially liable under of t te Zip Code s material?	Environmental law, if you know it	Date of notice	
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eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have you. No Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of ar No Yes. Fill in the details.	contaminant, or similar termow about, regardless of ou may be liable or potential unit. Governmental unit. Number Street. City States of hazardous.	m. when they occurred. entially liable under of t te Zip Code s material?	Environmental law, if you know it	Date of notice	
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eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of ar No Yes. Fill in the details.	Governmental unit Governmental unit City Sta	m. when they occurred. entially liable under of t te Zip Code t material?	Environmental law, if you know it	Date of notice	
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you keep as any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of ar No Yes. Fill in the details.	Governmental unit Governmental unit City Sta Governmental unit Governmental unit Number Street Governmental unit Number Street Governmental unit Number Street	m. when they occurred. entially liable under of t te Zip Code s material?	Environmental law, if you know it	Date of notice	

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Deb	tor 1	Barrack		G.	Christopher	Case	e number (if known)	
		First Name		Middle Name	Last Name			
26.	Hav	e vou been a narty	in any judio	ial or administr	ative proceeding under:	any environment	al law? Include settlements and order	·s
20.	ı ıav	e you been a party	in any judic	da or administr	ative proceeding under t	arry criviloriment	ariaw: include settlements and order	J.
	✓	No						
		Yes. Fill in the deta	ils.					
					Court or agency		Nature of the case	Status of the
								case
		Case title						Danding.
					Court Name			Pending
		_			Court Name			On appeal
		Case number			Number Street	_		
								Concluded
					City State	Zip Code		
								4
Part	11:	Give Details A	bout Your	Business or	Connections to An	y Business		
~	1800			L L		h		- 0
27.	vviti	nin 4 years before	you filed for	bankruptcy, did	i you own a business or	nave any of the f	ollowing connections to any business	5?
		A sole propriet	or or self-emp	oloyed in a trade,	profession, or other activit	y, either full-time o	r part-time	
				-) or limited liability partners		·	
		A partner in a		., copa, (==c	, or miniou masmity partition	Sp (==:)		
				ging executive of	a corporation			
								
		An owner or at	least 5% of the	ne voting or equit	y securities of a corporatio	n		
	V	No. None of the abo	ove applies. G	o to Part 12.				
	П	Yes. Check all that a	apply above a	nd fill in the detai	ls below for each business.			
					Describe the natu		ss Employer Identification r	number Do not
							include Social Security n	
							EIN:	
		Business Name			_		EIIV.	
		Number Street			—		Dates business existed	
					Name of accounta	ant or bookkeepe	er	
		City	State	Zip Code			From To	<u></u>
					Describe the net	una af tha huaimas	- Employer Identification	www.Do.not
					Describe the natu	ire of the busines	Employer Identification r include Social Security n	
								uniber of friit.
		Business Name			_		EIN:	
		Number Street			_		Dates business existed	
					Name of accounta	ant or bookkeepe	er	
		City	State	Zip Code			From To	
		Oity	Oldic	Zip Coue				
					Describe the natu	re of the busines		
							include Social Security n	umber or ITIN.
							EIN:	
		Business Name						
					_		Dates business svieted	
		Number Street			Name of accounta	ant or hookkeen	Dates business existed	
						or bookkeept		
		City	State	Zip Code			From To	

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Debte		Barrack	G.	Christopher	Case number (if known)			
		First Name	Middle Name	Last Name				
	28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.							
		No Yes. Fill in the details bel	OW.					
				Date issued				
		Name		MM/DD/YYYY				
		Number Street						
		City St	ate Zip Code					
Part	12:	Sign Below						
tı	rue a	nd correct. I understar	nd that making a false state	ment, concealing property,	s, and I declare under penalty of perjury that the answers are or obtaining money or property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.			
		★	ck Christopher		/s/ LaShon Christopher			
		Signature of			Signature of Debtor 2			
		Date 11/4/2	2016		Date 11/4/2016			
D	Did y	ou attach additional pa	ges to Your Statement of F	inancial Affairs for Individu	als Filing for Bankruptcy (Official Form 107)?			
Ŀ	Z N	lo						
] Y	es						
D	Did yo	ou pay or agree to pay	someone who is not an atto	orney to help you fill out bar	nkruptcy forms?			
Ŀ	Z N	lo						
Ī	Y	es. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).			

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Fill in this information to identify your case:				
Debtor 1	Barrack	G.	Christopher	
	First Name	Middle Name	Last Name	
Debtor 2	LaShon	M.	Christopher	
(Spouse, if filing	First Name	Middle Name	Last Name	
United States E	Sankruptcy Court for the:	Northern	District of Illinois	
Case number (If known)			(State)	

Check if this	is an
amended	filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

List Your Creditors Who Have Secured Claims

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property as exempt on Schedule C? secures a debt? Surrender the property. No. Creditor's name: LOANCARE SERVICING CTR Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 4209 Quail St, Zion, IL 60099 | Value: \$127,333.00 Retain the property and [explain]: No. Surrender the property. Creditor's name: ALLY FINANCIAL Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 2007 Chevrolet Aspen Retain the property and [explain]: Surrender the property. No. Creditor's name: SPRINGLEAF FINANCIAL SERVICES Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 2007 Chrysler PT Cruiser Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt:

Retain the property and [explain]:

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btor	Barrack	G.	Christopher	Case number (if
	First Name	Middle Name	Last Name	known)
.,				Part 2:
		rsonal Property Leases	in Schedule G: Executory	Contracts and Unexpired Leases (Official Form 106G), fill in the
ormat	tion below. Do not I	list real estate leases. Unexpired	d leases are leases that are	e still in effect; the lease period has not yet ended. You may assur
unex	pired personal prop	perty lease if the trustee does n	ot assume it. 11 U.S.C. § 3	665(p)(2).
Des	cribe your unexpire	ed personal property leases		Will the lease be assumed?
				□ No
Less	sor's name:			Yes
	cription of leased			
prop	perty:			
Less	sor's name:			☐ No
	Sol o Harrio.			Yes
	cription of leased			
prop	erty:			
Loor	anda nama.			☐ No
Less	sor's name:			Yes
Des	cription of leased			
prop	erty:			
				□ No
Less	sor's name:			Yes
Des	cription of leased			
	perty:			
				□ No
Less	sor's name:			Yes
Des	cription of leased			
	perty:			
				□ No
Less	sor's name:			Yes
Doc	cription of leased			_
	erty:			
Less	sor's name:			☐ No ☐ Yes
_				
	cription of leased erty:			
	-			
3:	Sign Below			
Jnde	er penalty of periury	v. I declare that I have indicated	my intention about any pr	operty of my estate that secures a debt and any personal
		to an unexpired lease.	, and an any pr	The state of the s
. ما	-/B		•	La Olivara Obristana Lara
	s/ Barrack Christop gnature of Debtor 1	oner		LaShon Christopher nature of Debtor 1
	-		_	
Da	ate 11/4/2016		Date	= 11/4/2016
	MM/DD/YYYY			MM/DD/YYYY

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Barrack G. Christopher ; LaShon M. Christopher	Case No.	
-	Debtor	-	(If known)
		Chapter	Chapter 7
	DISCLOSURE OF COMPEN	SATION OF ATTORNEY F	OR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2 that compensation paid to me within one year before services rendered or to be rendered on behalf of this as follows:	re the filing of the petition in bankruptcy, o	r agreed to be paid to me, for
	For legal services, I have agreed to accept		\$1,400.00
	Prior to the filing of this statement I have received		\$0.00
	Balance Due		\$1,400.00
2.	The source of the compensation paid to me was:		
		ner (specify)	
3.	The source of the compensation paid to me is:		
	✓ Debtor Oth	ner (specify)	
4.	I have not agreed to share the above-disclosed members and associates of my law firm.	d compensation with any other person unle	ess they are
	I have agreed to share the above-disclosed cormembers or associates of my law firm. A copy the people sharing in the compensation, is attactional to the compensation of the compensation.	of the agreement, together with a list of	
5.	In return for the above-disclosed fee, I have agreed a. Analysis of the debtor's financial situation, a bankruptcy;		
	b. Preparation and filing of any petition, sched	ules, statements of affairs and plan which	may be required;
	c. Representation of the debtor at the meeting	of creditors and confirmation hearing, and	I any adjourned hearings thereof;
6.	By agreement with the debtor(s), the above-disclos	ed fee does not include the following serv	ices:
		CERTIFICATION	
	I certify that the foregoing is a complete statement one debtor(s) in this bankruptcy proceedings.	of any agreement or arrangement for payn	nent to me for representation
	11/4/2016	/s/ Nathan Delman	
	Date	Signature of Attorney	
		Semrad Law Firm	
		Name of law firm	

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1400.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

Lunderstand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Initial: JM.C. B. JC.

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 11/4/16

Cileni -

Afforney :

Cliant

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

+		total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers.
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Christopher, Barrack G.; Christopher, LaShon M.	Case No	
	Debtor(s)	0400110.	_
		Chapter.	Chapter7
	VERIFICATION (OF CREDITOR MA	TRIX
	The above named Debtors hereby verify that the atta	ached list of creditors is tru	ue and correct to the best of their knowledge
Date:	11/4/2016	/s/ Christopher	, Barrack G.
		Christopher, B	
		Signature of D	ebtor
		/s/ Christopher	, LaShon M.
		Christopher, La	
		Signature of Jo	int Debtor

LOANCARE SERVICING CTR INTERSTATE CORP CNTR BLD NORFOLK , VA 23502

LENDING CLUB CORP 71 STEVENSON ST STE 300 SAN FRANCISCO, CA 94105

ALLY FINANCIAL 200 RENAISSANCE CTR DETROIT , MI 48243

SPRINGLEAF FINANCIAL SERVICES 18230 Halsted St Homewood , IL 60430

Fed Loan Serv Pob 69184 Harrisburg , PA 17106

ABBOTT LABORATORIES EC 401 N RIVERSIDE DR GURNEE , IL 60031

SYNCB/WALMART PO BOX 981400 EL PASO , TX 79998

CAPITAL ONE BANK USA N PO BOX 85520 RICHMOND , VA 23285

BARCLAYS BANK DELAWARE 125 S WEST ST WILMINGTON , DE 19801

ABBOTT LABORATORIES EC 401 N RIVERSIDE DR GURNEE , IL 60031

CAPITAL ONE BANK USA N PO BOX 85520 RICHMOND , VA 23285 SYNCB/CARCARE ONE C/O PO BOX 965036 ORLANDO , FL 32896

SYNCB/CCARE1 C/O PO BOX 965036 Orlando , FL 32896

ILDHFS 509 S. 6TH STREET SPRINGFIELD , IL 62701

Thompson, Marion 509 S. 6th St c/o State of Illinois Springfield , IL 62701

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Debtor 1 Barrack First Name	G. Middle Name	Christopher Last Name	Case number ([[known]	
	estions for Reporting Purpos			
16. What kind of debts do you have?	"incurred by an individu No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primari	ial primarily for a per ily business debts? r investment or throu	sonal, family, or househo Business debts are debts ugh the operation of the b	that you incurred to obtain ousiness or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid tha No.	ter 7. Do you estimate		erty is excluded and administrative creditors?
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5 5,001-1 10,001-	0,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	□ \$0-\$50,000 □ \$50,001-\$100,000 ☑ \$100,001-\$500,000 □ \$500,001-\$1 million	\$10,000 \$50,000	001-\$10 million 1,001-\$50 million 1,001-\$100 million 10,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	☐ \$0-\$50,000 ☐ \$50,001-\$100,000 ☑ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$10,000 \$50,000	001-\$10 million ,001-\$50 million ,001-\$100 million 0,001-\$500 million	S500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below	The second secon			
	correct. If I have chosen to file under Coof title 11, United States Code under Chapter 7. If no attorney represents me a out this document, I have obtain I request relief in accordance with the content of the coordance with the coordance	Chapter 7, I am aware e. I understand the re nd I did not pay or a ained and read the n with the chapter of ti	e that I may proceed, if eli- elief available under each gree to pay someone who otice required by 11 U.S.0 tle 11, United States Cod	e, specified in this petition.
	both. 18 U.S.C. §§ 152, 1341 ** _/s/ Barrack Christopher	case can result in fil	nes up to \$250,000, or im	prisonment for up to 20 years, or
BOOKTOOCH I BELLYT I SEE TOOCH IN SEAST IN STUDY I BESCHOOL OF SEE SEAST IN SEAST IN SEAST IN SEAST IN SEAST I	Signature of Debtor 1 Executed on 11/4/201t MM / D) D / YYYY	Signature of Dec	11/4/2016 MM / DD / YYYY

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Fill in this info	mation to identify your cas	se:			
Debtor 1	Ваггаск	G.	Christopher		
000.0,	First Name	Middle Name	Last Name		
Debtor 2	LaShon	М.	Christopher		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	Northern	District of Illinois		
Johnso Claroc.	ourning bodies of the.	101010111	(State)		
Case number					
<u> </u>	<u>. </u>			Check if this is	ar
Official	Form 106Dec			amended filing	
Declarat	ion About an Ir	- ndividual Debi	tor's Schedules	12/	15
If two married	neonie are filing together	hoth are equally reco	nsible for supplying correct in		
Part 1: Sign		ne who is NOT an attorn	ey to help you fill out bankrup	toy forms?	-
IZI No	-,3 p-,		oy to ttop you mi out benttup	y torma	
图			the state of the second		
Yes.	Name of person		Attach Bankruptcy Petitic Signature (Official Form	on Preparer's Notice, Declaration, and 119).	
Under per that they	nalty of perjury, I declare tare true and correct.	that I have read the sum	mary and schedules filed with	this declaration and	
✗ /s/ Barra Signature o	ck Christopher Harrack	M. Churtoph	Signature of D		
Date 11/4	/2016 /DD/YYYY		Date 11/4/20 MM/DD		

and the largest than the con-

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Debtor 1		G,	Christopher	Case number (if known)
	First Name	Middle Name	Last Name	
	thin 2 years before you ditors, or other parties		ou give a financial statem	ent to anyone about your business? Include all financial institutions,
Z	No Yes. Fill in the details t	pelow.		
			Date issued	9th
	Name	 	MM/DD/YYYY	-
	Number Street			
	City St	rate Zip Code		
Part 12:	Sign Below			
	nkruptcy case can resu	It in fines up to \$250,000, ack Christopher Parsesfa		serty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. ** /s/ LaShon Christopher Signature of Debtor 2
	Date 11/4/	2016		Date 11/4/2016
Did y	ou attach additional pa	ages to Your Statement o	Financial Affairs for Indiv	iduals Filing for Bankruptcy (Official Form 107)?
₩.	No Yes		٠.	
Did y	ou pay or agree to pay	someone who is not an a	torney to help you fill out	bankruptcy forms?
I	No			
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Carlos Calaba Back Back Back Colored

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Debtor	r Barrack	G.	Christopher	Case number (#
	First Name	Middle Name	Last Name	known)
art 2:	l ist Your Unexpi	red Personal Property Leas	ee	
nforma	ation below. Do not li	property lease that you listed in ist real estate leases. Unexpired nal property lease if the trustee	lleases are leases that a	Contracts and Unexpired Leases (Official Form 106G), fill in the re still in effect; the lease period has not yet ended. You may J.S.C. § 365(p)(2).
De	scribe your unexpire	d personal property leases		Will the lease be assumed?
Les	ssor's name:			retare du la level de la □ No
	scription of leased operty:			_
Les	ssor's name:			□ No
	scription of leased	e e especial	an and same and a second second	Yes
		e to a comment of the second s	ng man sangsang masa nasawa gamba tangsa kepitan da dipadifisah	and the same of th
Les	ssor's name:			□ No □ Yes
	scription of leased perty:			Lui
Les	ssor's name:			□ No □ Yes
	scription of leased perty:		to a constructive special	of the transport of the control of t
Les	sor's name:			□ No □ Yes
	cription of leased perty;			
Les	sor's name:	e eene oorde een ee		□ No □ Yes
	cription of leased perty:		1. 化二十烷烷	Had Control of the Co
Les	sor's name:			□ No □ Yes
	cription of leased perty:			—
		the first of the control of the state of the	ety a gante tea escriba per cape a per escriba de la participa de la persona de la persona de la persona de la	
Unde	Sign Below r penalty of perjury, leady that is subject to	I declare that I have indicated n	ny intention about any pr	operty of my estate that secures a debt and any personal
	•	1 1 15	O.	A ::
≭ / Sig	s/ Barrack Christoph gnature of Debtor 1	ner Barrad J. Churtas	, , , , - 42-	LaShon Christopher film m. Chan ture of Debtor 1
Da	ate 11/4/2016 MM/DD/YYYY		_	11/4/2016 MM/DD/YYYY

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

Christopher, Barrack G. ; Christopher, LaShon M. Debtor(s)	Case No	
	Chapter.	Chapter7
VERIFICATION	OF CREDITOR MA	TRIX
The above named Debtors hereby verify that the	attached list of creditors is t	rue and correct to the best of their
ledge.		
		A buch the
11/4/2016	Christopher, Ba	Barrack G. Barrack J. Christoph Irrack G.
	Signature of De	btor
	/s/ Christopher,	LaShon M. Jah m (1
	Christopher, La Signature of Jo.	Shon M. 🗸
	Kata Kabupatèn Jawa Barata	
	· ···································	
	e i sekakan kecama	

N.i.

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Debtor 1	Barrack	G.	Christopher	Case number (if known)			
	First Name	Middle Name	Last Name	Column A Debtor 1		Column B Debtor 2 or non-filing spous	se	
Do no	ployment compensation It enter the amount if you contend ocial Security Act. Instead, list it h	that the amount receive	d was a benefit under	\$0.00			_	
For yo	•		60.00					
•	our spouse	-	0.00					
9. Pensi benefi	on or retirement income. Do not it under the Social Security Act.	ot include any amount re	eceived that was a	\$0.00			_	
amour payme interna	me from all other sources not nt. Do not include any benefits recents received as a victim of a war ational or domestic terrorism. If n and put the total below.	ceived under the Social crime, a crime against	Security Act or numanity, or					
							_	
Total a	amounts from separate pages, if a	any,		+\$0.00	1 1	+		
	ulate your total current month mn. Then add the total for Colum			\$3,926.88	+		_]=	\$7,391.00
								Total current
Part 2:	Determine Whether the I	Maane Taet Annlia	s to You					monthly income
	late your current monthly inco							
	opy your total current monthly inc	-	W mood stops:		Canulin	e 11 here →	Г	\$7,391.00
	Multiply by 12 (the number of mor				Copy in	e ti here →	L	
	he result is your annual income f	• •				41	2h	X 12
,20. 1	ne result is your annual months if	or this part of the form.				3 .	2b	\$88,692.00
13 Calcul	ate the median family income	that applies to you. F	ollow these steps:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Fill in t	he state in which you live.	1	Illinois					
Fill in t	he number of people in your hou:	sehold.	4					
Fill in t	he median family income for you	r state and size of	****				13.	\$90,080.00
instruc	a list of applicable median incontions for this form. This list may a	ne amounts, go online u Iso be available at the b	ising the link specified in the ankruptcy clerk's office.	ne separate			L.	
14a. 🗸	do the lines compare? Line 12b is less than or equal:	to line 13. On the ten of	nnan 4. akasti kiin 4. YE.S		aliisaa .	- 1		
, 462. <u>[V</u>	Go to Part 3.	to line 13. On the top of	page 1, check box 1, the	e is no presumption or	abuse.			
14b. 	Line 12b is more than line 13. Go to Part 3 and fill out Form	On the top of page 1, ch 122A-2.	eck box 2, The presumption	on of abuse is determin	ed by For	m 122A-2,		
Part 3:	Sign Below							
By sig	ning here, I declare under penalt	y of perjury that the info	mation on this statement	and in any attachments	is true a	and correct.		
	s/ Barrack Christopher Hung	wh I And		LaShon Christophe	26	ch an (<u>_</u>	_
Da	ate 11/4/2016 MM/DD/YYYY		Dat	e <u>11/4/2016</u> MM/DD/YYYY				
	ou checked line 14a, do NOT fill o ou checked line 14b, fill out Form		nis form,					